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Application Number	10/573,133
Filing Date	January 12, 2007
First Named Inventor	Peter Dorff
Title	LIGANDS
Art Unit	N/A
Examiner Name	Not Yet Assigned
Attorney Docket No.	15652-04303-US

I hereby revoke all previous powers of attorney given in the above-identified application.

<input type="checkbox"/> A Power of Attorney is submitted herewith. <i>OR</i>									
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<input type="checkbox"/> I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:									
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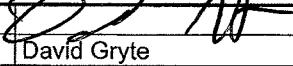
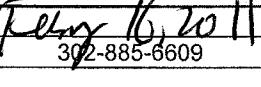
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I am the:

<input type="checkbox"/> Applicant/Inventor. <i>OR</i>	
<input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____	

SIGNATURE of Applicant or Assignee of Record

Signature		Date	
Name	David Gryte	Telephone	302-885-6609
Title and Company	Authorized Representative, AstraZeneca		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			
<input type="checkbox"/>	*Total of <u>1</u> forms are submitted.		